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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2008 calendar year, or tax year beginning **JULY 01**, 2008, and ending **JUNE 30**, 2009

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization **KIPP METRO ATLANTA COLLABORATIVE**
 Doing Business As
 Number and street (or P O box if mail is not delivered to street address) Room/suite
191 PEACHTREE ST., SUITE 810
 City or town, state or country, and ZIP + 4
ATLANTA GA 30303

D Employer identification number
11-3723114

E Telephone number
(404) 924-6310

G Gross receipts \$ **5,362,853**

F Name and address of principal officer

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list (see instructions)
H(c) Group exemption number

I Tax-exempt status 501(c)(3) (insert no) 4947(a)(1) or 527

J Website: **N/A**

K Type of organization Corporation Trust Association Other **L** Year of formation **M** State of legal domicile

Part I Summary		Prior Year	Current Year
ACTIVITIES & GOVERNANCE	1 Briefly describe the organization's mission or most significant activities TO PREPARE STUDENTS FOR TOP QUALITY HIGH SCHOOLS, COLLEGES AND THE WORLD BEYOND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of employees (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
REVENUE	8 Contributions and grants (Part VIII, line 1h)	1,367,570	5,276,180
	9 Program service revenue (Part VIII, line 2g)		82,849
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,824
	11 Other revenue (Part VIII, column (A), lines 5-6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,367,570	5,362,853
EXPENSES	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	397,900	
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	47,832	2,260,467
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25)		122,861
	17 Other expenses (Part IX, column (A), lines 11f-11d, 11f-24f)	62,693	898,535
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	508,425	3,159,002
19 Revenue less expenses Subtract line 18 from line 12	859,145	2,203,851	
NET ASSETS OR FUND BALANCES	20 Total assets (Part X, line 16)	Beginning of Year 1,383,681	End of Year 6,295,975
	21 Total liabilities (Part X, line 26)	286,777	743,873
	22 Net assets or fund balances Subtract line 21 from line 20	1,096,904	5,552,102

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: *David Jernigan* Date: **2-15-10**
DAVID JERNIGAN Executive Director
 Type or print name and title

Paid Preparer's Use Only
 Preparer's signature: *Sharon McKelvey* Date: **2-16-10** Check if self-employed
 Firm's name (or yours if self-employed): **MCKELVEY & RUSSELL, LLC, CPA** EIN: **PO BOX 1026**
 address, and ZIP + 4: **DECATUR, GA 30031-1026** Phone no: **(404) 378-9077**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2008)

614 22

Part III Statement of Program Service Accomplishments(see instructions)

1 Briefly describe the organization's mission.

TO PREPARE STUDENTS FOR TOP QUALITY HIGH SCHOOLS, COLLEGES AND THE WORLD BEYOND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 2,604,263 including grants of \$) (Revenue \$ 5,362,853)

See attachment #1

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ \$ 2,604,263 (Must equal Part IX, Line 25, column (B))

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	N/A	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U S ?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	N/A	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	N/A	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	N/A	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV		X
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable		
	1a 5		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		
	N/A		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	N/A		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
	N/A		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	N/A		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
	N/A		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a	The organization's CEO, Executive Director, or top management official?		X
b	Other officers or key employees of the organization?		X
	Describe the process in Schedule O. (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		
	N/A		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► **GA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► **See attachment #2**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any officer, director, trustee, or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		INDIVIDUAL	DIRECTOR	INSTITUTIONAL	TRUSTEE	OFFICER	KEY EMPLOYEE	HIGHEST COMPENSATED			
TOM PRITCHARD CHAIR	4.00	X							0	0	0
BERRY BERLIN BOARD MEMBER	4.00	X							0	0	0
KATHE BROWN BOARD MEMBER	4.00	X							0	0	0
CHARLOTTE DIXON BOARD MEMBER	4.00	X							0	0	0
CRAIG JONES BOARD MEMBER	4.00	X							0	0	0
IRVING MITCHEL BOARD MEMBER	4.00	X							0	0	0
SHAJRA JOHNSON MITCHELL BOARD MEMBER	4.00	X							0	0	0
MARNI MOHR BOARD MEMBER	4.00	X							0	0	0
GAIRY MOORE BOARD MEMBER	4.00	X							0	0	0
JACK WARD BOARD MEMBER	4.00	X							0	0	0
DAVID JERNIGAN EXECUTIVE DIRECTOR	60.00						X	X	117,470	0	0
VINICE DAVIS OFFICER	50.00						X	X	55,330	0	0
WILLIAM MARK STURM CFO	50.00						X		37,558	0	0

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
G O T H E R C O N T R I B U T I O N S	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	1,887,636				
	f	All other contributions, gifts, grants, & similar amounts not included above	1f	3,388,544				
	g	Noncash contributions included in lines 1a-1f	\$					
	h	Total. Add lines 1a-1f			5,276,180			
P R O G R A M R E V E N U E	2a	ACADEMIC AND PROGRAM S	Business Code	48,404	48,404			
	b	OTHER INCOME		19,670	19,670			
	c	STUDENT MEAL INCOME		14,775	14,775			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			82,849			
O T H E R R E V E N U E	3	Investment income (including dividends, interest, and other similar amounts)		3,824			3,824	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6a	Gross Rents	(i) Real	(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
d	Net rental income or (loss)							
7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
b	Less cost or other basis and sales expenses							
c	Gain or (loss)							
d	Net gain or (loss)							
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c)							
b	Less direct expenses							
c	Net income or (loss) from fundraising events							
9a	Gross income from gaming activities See Part IV, line 19							
b	Less direct expenses							
c	Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less returns and allowances							
b	Less cost of goods sold							
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			5,362,853	82,849		3,824	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	274,948	179,474	82,974	12,500
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,630,942	1,384,286	177,101	69,555
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	296,533	243,243	39,734	13,556
10	Payroll taxes	58,044	48,941	7,080	2,023
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	57,166	45,733	11,433	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization #3	66,336	49,922	16,414	
23	Insurance	29,163	18,037	11,126	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	<u>DIRECT STUDENT EXPENSES</u>	445,132	445,132		
b	<u>STAFF DEVELOPMENT AND RECRUI</u>	61,191	37,636	23,555	
c	<u>REPAIR AND MAINTENANCE</u>	52,752	42,186	10,566	
d	<u>LICENSE FEE</u>	30,070	30,070		
e	<u>PROFESSIONAL FEES</u>	27,482		27,482	
f	All other expenses #4	129,243	79,603	24,413	25,227
25	Total functional expenses. Add lines 1 through 24f	3,159,002	2,604,263	431,878	122,861
26	Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet		(A)		(B)
		Beginning of year		End of year
ASSETS	1 Cash – non-interest bearing		1	
	2 Savings and temporary cash investments	883,247	2	2,771,194
	3 Pledges and grants receivable, net	225,000	3	799,774
	4 Accounts receivable, net	24,317	4	14,137
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	11,164	9	28,390
	10a Land, buildings, and equipment cost basis	10a 1,989,028		
	b Less accumulated depreciation Complete Part VI of Schedule D	10b 340,307	10c	1,648,721
	11 Investments -- publicly traded securities		11	
	12 Investments -- other securities See Part IV, line 11		12	
	13 Investments -- program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	225,000	15	1,033,759
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,383,681	16	6,295,975	
LIABILITIES	17 Accounts payable and accrued expenses	3,896	17	543,873
	18 Grants payable	260,000	18	200,000
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities Complete Part X of Schedule D	22,881	25	
	26 Total liabilities. Add lines 17 through 25	286,777	26	743,873
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	496,904	27	3,098,614
	28 Temporarily restricted net assets	600,000	28	2,453,488
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	1,096,904	33	5,552,102	
34 Total liabilities and net assets/fund balances	1,383,681	34	6,295,975	

Part XI Financial Statements and Reporting		Yes	No
1	Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? N/A		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

Name of the organization: **KIPP METRO ATLANTA COLLABORATIVE, INC.**
Employer identification number: **11-3723114**

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is (Please check only one organization)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I
 - b Type II
 - c Type III-Functionally integrated
 - d Type III-Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? N/A
 - (ii) A family member of a person described in (i) above? N/A
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above? N/A

	Yes	No
N/A 11g(i)		
N/A 11g(ii)		
N/A 11g(iii)		

h Provide the following information about the organizations the organization supports

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			855,421	1,367,570	5,276,180	7,499,171
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5			855,421	1,367,570	5,276,180	7,499,171
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						7,499,171

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6			855,421	1,367,570	5,276,180	7,499,171
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12.)						7,499,171

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	100.00 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	100.00 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	0 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3 % support tests -- 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests -- 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**

Open to Public Inspection

Name of the organization
KIPP METRO ATLANTA COLLABORATIVE, INC.

Employer identification number
11-3723114

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
- | | |
|---|--|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat | <input type="checkbox"/> Preservation of certified historic structure |
| <input type="checkbox"/> Preservation of open space | |
- 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
- | | Held at the End of the Year |
|--|-----------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06 | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earning or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments -- Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,553,521	282,638	1,270,883
d Equipment		108,884	47,412	61,472
e Other		326,623	10,257	316,366
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				1,648,721

Part VII Investments -- Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments -- Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
See attachment #5	
Total. (Column (b) should equal Form 990, Part X, col (B) line 15) ▶	

1,033,759

Part X Other Liabilities. See Form 990, Part X, line 25

(a) Description of liability	(b) Amount
Federal income taxes	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	5,362,853
2	Total expenses (Form 990, Part IX, column (A), line 25)	3,159,002
3	Excess or (deficit) for the year Subtract line 2 from line 1	2,203,851
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	2,251,347
9	Total adjustments (net) Add lines 4-8	2,251,347
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	4,455,198

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	7,484,822
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV)	2,121,969
e	Add lines 2a through 2d	2,121,969
3	Subtract line 2e from line 1	5,362,853
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV)	
c	Add lines 4a and 4b	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5,362,853

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	5,028,044
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities	
b	Prior year adjustments	
c	Losses reported on Form 990, Part IX, line 25	
d	Other (Describe in Part XIV)	1,869,042
e	Add lines 2a through 2d	1,869,042
3	Subtract line 2e from line 1	3,159,002
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV)	
c	Add lines 4a and 4b	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	3,159,002

Part XIV Supplemental information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b

KIPP METRO ATANTA MERGED WITH KIPP WAYS ACADEMY AND KIPP STRIVE ON JANUARY 1, 2009. KIPP METRO ATLANTA'S AUDIT FINANCIAL STATEMENTS INCLUDE THE ACTIVYT OF KIPP WAYS ACADEMY AND KIPP STRIVE ACADEMY. THIS FORM 990 DOES NOT INCLUDE THE ACTIVITY FOR KIPP WAYS ACADEMY AND KIPP WAYS ACADEMY FOR THE PERIOD JULY 1, 2008 - DECEMBER 31, 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

KIPP METRO ATLANTA COLLABORATIVE, INC.

Employer identification number

11-3723114

PAGE 2, QUESTION 2 & 3 - KIPP METRO ATLANTA MERGED WITH TWO CHARTER PUBLIC SCHOOLS - KIPP WAYS ACADEMY AND KIPP STRIVE ACADEMY. KIPP METRO ATLANTA WAS THE SURVIVING ORGANIZATION

PAGE 6, QUESTION 19 - COPIES OF POLICY STATEMENTS ARE AVAILABLE UPON REQUEST

PAGE 6, QUESTION 10 - BOARD MEMBERS WERE E-MAILED A COPY OF FORM 990 TO REVIEW

PAGE 6, QUESTION 12C - AT THE ANNUAL BOARD MEETING, ALL DIRECTORS AND OFFICERS ARE REQUIRED TO SIGN A "CONFLICT OF INTEREST" DOCUMENT, WHICH REQUIRES THEM TO DISCLOSE INTEREST THAT COULD GIVE RISE TO CONFLICTS

PAGE 5, QUESTION 2A, KIPP METRO ATLANTA EMPLOYEES WERE PAID THROUGH KIPP WAYS ACADEMY'S PAYROLL THROUGH JUNE 30, 2009.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2008

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ See separate instructions.

Open to Public
Inspection

Name of the organization

KIPP METRO ATLANTA COLLABORATIVE, INC.

Employer identification number
11-3723114

Part I Identification of Disregarded Entities.

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
KIPP SOUTH FULTON ACADEMY, INC. 1286 E. WASHINGTON AVENUE EAST POINT, GA 30344	CHARTER SCHOOL	Georgia	501C3	YES	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2008

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations?		(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to other organization(s)		X
c Gift, grant, or capital contribution from other organization(s)		X
d Loans or loan guarantees to or for other organization(s)		X
e Loans or loan guarantees by other organization(s)		X
f Sales of assets to other organization(s)		X
g Purchase of assets from other organization(s)		X
h Exchange of assets		X
i Lease of facilities, equipment, or other assets to other organization(s)		X
j Lease of facilities, equipment, or other assets from other organization(s)		X
k Performance of services or membership or fundraising solicitations for other organization(s)		X
l Performance of services or membership or fundraising solicitations by other organization(s)		X
m Sharing of facilities, equipment, mailing lists, or other assets		X
n Sharing of paid employees		X
o Reimbursement paid to other organization for expenses		X
p Reimbursement paid by other organization for expenses		X
q Other transfer of cash or property to other organization(s)		X
r Other transfer of cash or property from other organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

Attachment 1: Form 990 Page 2, Part III

Open to Public Inspection	For calendar year 2008, or tax period beginning	07-01-2008, and ending	06-30-2009.
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Name of Organization	Employer Identification Number
KIPP METRO ATLANTA COLLABORATIVE, INC.	11-3723114

Part III - Statement of Program Service Accomplishments			
Code	Expenses	including Grants of	Revenue
	2,604,263		5,362,853
Exempt Purpose Achievements			

KIPP METRO ATLANTA'S EXEMPT PURPOSE IS TO SUPPORT THE MISSION OF THE KIPP SCHOOLS IN METRO ATLANTA.

BOOKS ARE IN CARE OF

Attachment 2: Form 990 Page 6, Part VI, Section C, Line 20

Open to Public Inspection	For calendar year 2008 or tax period beginning	07-01	, and ending	06-30-2009.
Name of Organization				Employer Identification Number
KIPP METRO ATLANTA COLLABORATIVE, INC.				11-3723114
Part VII	Books in Care of			

Individual Name DAVID JERNIGAN
or
Business Name

Street Address 191 PEACHTREE ST., STE 810

U.S. Address
Zip code 30303 City Atlanta State GA

Foreign Address
City _____
Province or State _____
Country _____
Postal code _____
Phone Number (404) 924-6310
Fax Number _____

SCHEDULE OF DEPRECIATION AND DEPLETION

Attachment 3: Form 990 Page 10, Part IX, Line 22

Open to Public Inspection

For Calendar year 2008, or tax year period beginning 07-01-2008

and ending 06-30-2009

Name of Organization

KIPP METRO ATLANTA COLLABORATIVE, INC.

Employer Identification Number

11-3723114

Description of Property	Date Acquired	Cost or Other Basis	Prior Year Depreciation	Method of Computation	Rate (%) or Life (Years)	Depreciation This Year
						66,336
Total						66,336

SCHEDULE OF OTHER EXPENSES

Attachment 4: Form 990 Page 10, Line 24 - Other Expenses

Open to Public

Inspection

For calendar year 2008 or tax period beginning 07-01-2008, and ending 06-30-2009.

Name of Organization

KIPP METRO ATLANTA COLLABORATIVE, INC.

Employer Identification Number

11-3723114

Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
UTILITIES	25,464	20,371	5,093	
TELEPHONE AND INTERNET	21,139	15,990	5,149	
MISCELLANEOUS	19,230	15,384	3,846	
DEVELOPMENT	19,023			19,023
OFFICE SUPPLIES	15,888	12,003	3,885	
STAFF TRAVEL	10,166	8,133	2,033	
SUPPORT SERVICES	5,832			5,832
PRINTING AND COPYING	5,209	3,907	1,042	260
EQUIPMENT RENTAL	3,661	2,129	1,532	
POSTAGE	2,248	1,686	450	112
COMMON AREA FURNITURE	1,383		1,383	
Total	129,243	79,603	24,413	25,227

SCHEDULE D, PART IX - OTHER ASSETS

Attachment 5: Sch D Page 3, Part IX - Other Assets

Open to Public Inspection	For calendar year 2008 or tax period beginning 07-01-2008, and ending 06-30-2009.
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Name of Organization KIPP METRO ATLANTA COLLABORATIVE, INC.	Employer Identification Number 11-3723114
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(a) Description	(b) Book value
GRANT RECEIVABLE	1,000,000
RECEIVABLE - KIPP SOUTH FULTON ACADEMY	33,759
Total	1,033,759

KIPP METRO ATLANTA COLLABORATIVE, INC

Description	Date	Method	Year	Cost	Accum Depr		Depr Exp		Accum Depr
					6/30/2008	7/1-12/31/08	1/1-6/30/09	7/1/08-6/30-09	6/30/2009
DIVISION - KIPP WEST ATLANTA YOUNG SCHOLARS ACADEMY:									
<u>Improvements</u>									
LEASEHOLD IMPROVEMENTS	09-30-03	S/LHY	15	131,082	41,510	4,369	4,370	0	50,249
LEASEHOLD IMPROVEMENTS	02-23-04	S/LHY	15	26,884	8,512	896	896	0	10,304
LEASEHOLD IMPROVEMENTS	06-30-05	S/L	15	8,136	1,671	271	271	0	2,213
LEASEHOLD IMPROVEMENTS	06-30-05	S/L	15	99,436	20,439	3,315	3,314	0	27,068
LEASEHOLD IMPROVEMENTS	06-30-05	S/L	15	68,431	14,066	2,281	2,281	0	18,628
LEASEHOLD IMPROVEMENTS	09-30-06	S/L	15	621,632	75,977	20,721	20,721	0	117,419
LEASEHOLD IMPROVEMENTS	06-30-07	S/LHY	15	38,771	4,524	1,293	1,292	0	7,109
SECURITY SYSTEM	07-31-07	S/LHY	15	19,960	1,331	665	666	0	2,662
2ND FLOOR RENOVATION	09-18-07	S/LHY	15	180,612	10,034	6,021	6,020	0	22,075
HVAC	01-22-08	S/LHY	15	13,616	454	454	454	0	1,362
FENCING	01-24-08	S/LHY	15	44,840	1,494	1,494	1,495	0	4,483
PASS THROUGH	02-26-08	S/LHY	15	6,976	194	233	232	0	659
PARTITIONS	02-26-08	S/LHY	15	5,432	151	181	181	0	513
PAVING	04-28-08	S/LHY	15	23,229	387	774	775	0	1,936
1ST FLOOR WINDOWS	06-25-08	S/LHY	15	118,617	659	3,954	3,954	0	8,567
CARPETING	06-26-08	S/LHY	15	4,404	24	147	147	0	318
1ST FLOOR WINDOWS	09-23-08	150DBHY	15	39,539	0	989	988	0	1,977
ROOF INSTALL-REPAIR	02-12-09	S/LHY	15	70,723	0	0	3,536	0	3,536
FENCE	04-01-09	S/LHY	15	2,503	0	0	125	0	125
FACILITY REPAIRS	06-30-09	S/LHY	15	28,700	0	0	1,435	0	1,435
Totals				1,553,523	181,427	48,058	53,153	0	282,638
<u>Transportation Equipment</u>									
SCHOOL BUS	06-29-05	S/L	5	5,060	3,120	506	506	0	4,132
SCHOOL BUS	08-18-06	S/L	5	10,500	4,025	1,050	1,050	0	6,125
Totals				15,560	7,145	1,556	1,556	0	10,257
<u>Computer</u>									
LAPTOP FOR PRINCIPAL	07-01-02	S/L	5	1,979	1,979	0	0	0	1,979
LAPTOP TYRA & DEBBIE	05-19-03	S/LHY	5	1,792	1,790	0	0	0	1,790
LAPTOPS	06-10-03	S/LHY	5	3,621	3,620	0	0	0	3,620
LAPTOPS KAMAO & SABR	06-21-03	S/LHY	5	3,621	3,620	0	0	0	3,620
COMPUTER SOFTWARE	08-29-06	S/LHY	5	1,055	404	105	106	0	615
COMPUTER EQUIPMENT	08-29-06	S/LHY	5	4,985	1,911	499	498	0	2,908
COMPUTERS	08-30-06	S/LHY	5	4,659	1,786	466	466	0	2,718
COMPUTER EQUIPMENT	08-30-06	S/LHY	5	1,687	646	169	168	0	983
SOFTWARE	08-30-06	S/LHY	5	688	264	69	69	0	402
INTERACTIVE SOFTWARE	03-08-07	S/LHY	5	7,000	1,867	700	700	0	3,267
DELL COMPUTER	07-06-07	S/LHY	5	23,697	4,739	2,369	2,370	0	9,478
DELL COMPUTER	07-26-07	S/LHY	5	2,338	468	234	234	0	936
COMPUTER EQUIPMENT	07-26-07	S/LHY	5	9,516	1,903	951	952	0	3,806
DELL COMPUTER	09-07-07	S/LHY	5	8,886	1,481	889	888	0	3,258
COMPUTER	09-07-07	S/LHY	5	1,424	238	142	143	0	523
DELL COMPUTER	06-20-08	S/LHY	5	4,336	72	434	433	0	939
COMPUTER SYSTEM	08-18-08	S/LHY	5	3,081	0	308	308	0	616
COMPUTER	01-21-09	S/LHY	5	1,790	0	0	358	0	358
TOTAL COMPUTER				86,155	26,788	7,335	7,693	0	41,816
TOTAL KIPP WAYS DIVISION				1,655,238	215,360	56,949	62,402	0	334,711

DIVISION - KIPP METRO ATLANTA COLLABORATIVE

Computer

COMPUTER	4/28/08	S/LHY	5	1,150	115	0	230	345
COMPUTER	6/13/08	S/LHY	5	1,134	113	0	227	340
COMPUTER	6/13/08	S/LHY	5	3,402	341	0	680	1,021
IN KIND FURNITURE	6/17/08	S/LHY	5	7,630	763	0	1,526	2,289
COMPUTER	6/18/08	S/LHY	5	212	21	0	42	63
COMPUTER	6/19/08	S/LHY	5	813	81	0	163	244
COMPUTER	6/27/08	S/LHY	5	1,367	137	0	273	410
COMPUTER	6/30/08	S/LHY	5	907	91	0	181	272
DELL COMPUTER	10/11/08	S/LHY	5	1,108	0	0	111	111

TOTAL - KIPP METRO ATLANTA COLLABORATIVE DIVISION	17,723	1,662	0	0	3,433	5,095
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DIVISION - KIPP STRIVE ACADEMY, INC.

COMPUTER	6/15/09	S/LHY	5	5,005	0	0	0	501	501
CONSTRUCTION IN PROGRESS				311,062	0	0	0	0	0

TOTAL - KIPP STRIVE DIVISION	316,067	0	0	0	501	501
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TOTAL ALL DIVISIONS	1,989,028	217,022	56,949	62,402	3,934	340,307
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STATE OF GEORGIA

Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF MERGER

I, **Karen C Handel**, the Secretary of State and the Corporations Commissioner of the State of Georgia, do hereby issue this certificate pursuant to Title 14 of the Official Code of Georgia annotated certifying that articles or a certificate of merger and fees have been filed regarding the merger of the below entities, effective as of 01/01/2009. Attached is a true and correct copy of the said filing.

Surviving Entity:

KIPP METRO ATLANTA COLLABORATIVE, INC., a Georgia Non-Profit Corporation

Nonsurviving Entity/Entities:

KIPP WEST ATLANTA YOUNG SCHOLARS (WAYS) ACADEMY, INC.,
a Georgia Non-Profit Corporation,
**SUCCESS THROUGH RIGOROUS INSTRUCTION, VIRTUE, AND
ENRICHMENT (STRIVE) ACADEMY, INC.**,
a Georgia Non-Profit Corporation

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on January 1, 2009



Karen C Handel
Secretary of State

ARTICLES OF MERGER
OF
KIPP WEST ATLANTA YOUNG SCHOLARS (WAYS) ACADEMY, INC.,
A GEORGIA NONPROFIT CORPORATION,
AND
SUCCESS THROUGH RIGOROUS INSTRUCTION, VIRTUE, AND ENRICHMENT
(STRIVE) ACADEMY, INC., A GEORGIA NONPROFIT CORPORATON
INTO
KIPP METRO ATLANTA COLLABORATIVE, INC., A GEORGIA NONPROFIT
CORPORATION

ARTICLES OF MERGER by and among KIPP METRO ATLANTA COLLABORATIVE, INC., a Georgia Nonprofit corporation ("KIPP-MAC"), and the following corporations: KIPP WEST ATLANTA YOUNG SCHOLARS (WAYS) ACADEMY, INC., a Georgia Nonprofit corporation, and SUCCESS THROUGH RIGOROUS INSTRUCTION, VIRTUE, AND ENRICHMENT (STRIVE) ACADEMY, INC., a Georgia Nonprofit corporation (collectively, "Schools") (KIPP-MAC and the Schools, collectively the "Constituent Corporations").

Pursuant to Article 11 of the Georgia Nonprofit Corporation Code (the "Code") KIPP METRO ATLANTA COLLABORATIVE, INC., , and the following corporations: KIPP WEST ATLANTA YOUNG SCHOLARS (WAYS) ACADEMY, INC. and SUCCESS THROUGH RIGOROUS INSTRUCTION, VIRTUE, AND ENRICHMENT (STRIVE) ACADEMY, INC. adopt the following Articles of Merger.

1. The Agreement and Plan of Merger, dated as of October 29, 2008, ("Plan of Merger"), between KIPP-MAC and the Schools was duly approved and adopted by a sufficient vote of the Board of Directors of KIPP METRO ATLANTA COLLABORATIVE, INC. on October 29, 2008, and was duly approved and adopted by a sufficient vote of the Board of Directors of KIPP WEST ATLANTA YOUNG SCHOLARS (WAYS) ACADEMY, INC on October 29, 2008, and was duly approved and adopted by a sufficient vote of the Board of Directors of SUCCESS THROUGH RIGOROUS INSTRUCTION, VIRTUE, AND ENRICHMENT (STRIVE) ACADEMY, INC. on October 29, 2008.

2. There being no members of any of the Constituent Corporations, no approval by members was required.

3. The Plan of Merger is attached as Exhibit A and incorporated by reference as if fully set forth.

4. Pursuant to Section 11-3-1104(c) of the Code, the date and time of the effectiveness of the Merger shall be on January 1, 2009.



• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

Part II		Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy	
Type or print File by the extended due date for filing the return See instructions.	Name of Exempt Organization		Employer identification number
	KIPP METRO ATLANTA COLLABORATIVE, INC.		11-3723114
	Number, street, and room or suite no. If a P O box, see instructions		For IRS use only
	191 PEACHTREE ST., SUITE 810		
	City, town or post office, state, and ZIP code For a foreign address, see inst		
	ATLANTA GA 30303		

Check type of return to be filed (File a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of SEE ATTACHMENT #2

Telephone No. FAX No

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until MAY 15, 2010
- 5 For calendar year _____, or other tax year beginning JUL 01, 2008, and ending JUN 30, 2009
- 6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period
- 7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$	0
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Sharon M Kewey Title CPA Date 2-12-10

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension -- check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization KIPP METRO ATLANTA COLLABORATIVE, INC.	Employer identification number 11-3723114
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions 191 PEACHTREE ST., SUITE 810	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions ATLANTA GA 30303	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ SEE ATTACHMENT #1

Telephone No. ▶ _____ FAX No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 20 10, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ calendar year 20__ or

▶ tax year beginning JULY 01, 20 08, and ending JUNE 30, 20 09.

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.